

SCHOOL APPLICATION FORM

PART 1: PERSONAL INFORMATION

UNIT: _____ DATE: _____

NAME: _____ RANK/GRADE: _____ SSN: _____

SEX: _____ ETS/MRD: _____ PEBD: _____ DOR: _____ DOB: _____

HEIGHT: _____ WEIGHT: _____ BODY FAT PASS _____ PT CLEARED: _____ Enlisted DMOS: _____ Enlisted PMOS: _____

DUTY POSITION TITLE: _____ OFFICER AOC: _____ PSSI: _____ BRANCH: _____

MAILING ADDRESS: _____ HOME PHONE: _____

_____ WORK PHONE: _____

WITHHOLDING/EXEMPTIONS: _____ DA 5960 RECERT DATE: _____ TOTAL LUMP SUM LV PD: _____

LAST APFT (DATE): _____ APFT (SCORE): _____

PART II. SCHOOL INFORMATION

COURSE TITLE: _____ LOCATION: _____

SCHOOL CODE: _____ COURSE NUMBER: _____ PHASE: _____

FIRST CHOICE	SECOND CHOICE	THIRD CHOICE
CLASS NUMBER: _____	_____	_____
REPORT DATE: _____	_____	_____
END DATE: _____	_____	_____

ARE YOU AVAILABLE TO ATTEND ON SHORT NOTICE? _____ FIRST AVAILABLE DATE: _____

*NOTE: IAW AR 135-200, to attend a school of 15 days or less in duration you must have one year remaining in service. For courses greater than 15 days your must have 2 years remaining in service. This application cannot be processed if you do not fulfill this requirement.

Soldier Acknowledgement:

I acknowledge I am required to maintain my fitness for this course. Should I fail to show for any scheduled course that shows a "reservation" in ATRRS or arrive unqualified to attend training, I may be subject to disciplinary action or separated from the National Guard. In the event of some unforeseen event I cannot attend my scheduled date or will be unable to meet training qualification, I will immediately notify the Unit Training NCO to cancel and reschedule training in compliance with unit policy and SOP.

SIGNATURE OF APPLICANT: _____ DATE: _____

IMMEDIATE SUPERVISOR: _____ DATE: _____

1SG/COMMANDER'S APPROVAL: _____ DATE: _____